					Application or Docket Number					Ì				
	PATENT			N FEE DI e Novemb		09	14	472	X					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAL TYPE	L ENTITY	OR	OTHER		
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	7	RATE	FEE	1
BASIC FEE									19.	380.00	OR		760.00	
TOTAL CLAIMS			92	minus 2	20= *	* 73			X\$ 9=		OR	X\$18=	1314	
INDEPENDENT CLAIMS				2 minus	3 = *	10			X39=		OR	X78=	780	
ML	MULTIPLE DEPENDENT CLAIM PRESENT									:	OR	+260=		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2									-	OR	TOTAL	2854	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALI	L ENTITY	OR	OTHER SMALL		
ALNI		CL REM. AF	AIMS AINING TER IDMENT	and the second second	H N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	. 9	3	Minus	**	93	= /		X\$ 9=		OR	X\$18=		
	Independent	* 1	2	Minus	***	12	= 🜙		X39=		OR	X78=		
_	FIRST PRESE	NTATIC	ON OF MU	JLTIPLE DEF	PENDE	ENT CLAIM			+130=	-	OR	+260=		
	· 7							L	TOTA ADDIT. FE			TOTAL ADDIT. FEE		
((Colu	⊌ m n 1)		(Co	olumn 2)	(Column 3)	,	NODII. FE	F 1		ADDII. I EEI		
ENDMENT B		RÉM. AF	AIMS AINING TER IDMENT		PRE P/	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE /	A.
	Total	* /0	6	Minus	** (<u> </u>	= 005		X\$ 9=	11700	OR	X\$18=	Degal 1	90
AMEND	Independent FIRST PRESE	* 2 NTATIC	N OF ML	Minus JLTIPLE DEF	PENDE	NT CLAIM	=004		X39=	420 00	OR	X78=	Esper	33
					*				+130=		OR	+260=		
								Δ	TOTA DDIT. FEI		OR	TOTAL ADDIT. FEE		
			umn 1)			olumn 2)	(Column 3)							
AMENDMENT &		REM.	AIMS AINING TER IDMENT		N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	*		Minus	##	110	=		X\$ 9=		OR	X\$18=		
ANE	Independent	*		Minus	***	23	=		X39=		OR	X78=		i.
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								466			000		
*	If the entry in colur	mn 1 is le	ess than th	e entry in colu	mn 2. v	vrite "0" in col	umn 3.		+130=		OR	+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE			
	The "Highest Num	ber Prev	iously Paid	d For" (Total or	Indepe	endent) is the	highest number	r four	nd in the a	ppropriate bo	k in col	umn 1.		